

TRANSMITTAL FORM

Attorney Docket No.
RPS920030076US1/2850PIn re the application: **Simon COCHU et al.**Confirmation No.: **3778**Serial No: **10/606,043**Group Art Unit: **To Be Assigned**Filed: **June 25, 2003**Examiner: **To Be Assigned**For: **Method and System for Load Balancing Switch Modules in a Server System and a Computer System Utilizing the Same**

ENCLOSURES (check all that apply)

<input type="checkbox"/>	Amendment/Reply	<input type="checkbox"/>	Assignment and Recordation Cover Sheet	<input type="checkbox"/>	After Allowance Communication to Group
<input type="checkbox"/>	After Final	<input type="checkbox"/>	Part B-Issue Fee Transmittal	<input type="checkbox"/>	Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/>	Information disclosure statement	<input type="checkbox"/>	Letter to Draftsman	<input type="checkbox"/>	Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/>	Form 1449	<input checked="" type="checkbox"/>	Drawings (Figs. 5-8)	<input type="checkbox"/>	Status Letter
<input type="checkbox"/>	(X) Copies of References	<input type="checkbox"/>	Petition	<input checked="" type="checkbox"/>	Postcard
<input type="checkbox"/>	Extension of Time Request *	<input type="checkbox"/>	Fee Address Indication Form	<input checked="" type="checkbox"/>	Other Enclosure(s) (please identify below):
<input type="checkbox"/>	Express Abandonment	<input type="checkbox"/>	Terminal Disclaimer	- Copy of Notice of Omitted Item in a Nonprovisional Application - Executed Supplemental Declaration and Power of Attorney	
<input type="checkbox"/>	Certified Copy of Priority Doc	<input type="checkbox"/>	Power of Attorney and Revocation of Prior Powers		
<input checked="" type="checkbox"/>	Response to Notice of Omitted Item in a Nonprovisional Application and Petition	<input type="checkbox"/>	Change of Correspondence Address		
<input type="checkbox"/>	Response to Missing Parts	*Extension of Term: Pursuant to 37 CFR 1.136, Applicant petitions the Commissioner to extend the time for response for xxxxxx month(s), from to .			
<input type="checkbox"/>	Executed Declaration by Inventor(s)				

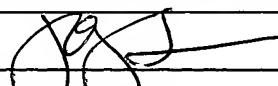
CLAIMS

FOR	Claims Remaining After Amendment	Highest # of Claims Previously Paid For	Extra Claims	RATE	FEE
Total Claims	42	42	0	\$18.00	\$ 0.00
Independent Claims	6	6	0	\$84.00	\$ 0.00
Total Fees					\$ 0.00

METHOD OF PAYMENT

<input checked="" type="checkbox"/>	Check no. 6694 in the amount of \$130.00 is enclosed for payment of petition fee.
<input type="checkbox"/>	Charge \$ _____ to Deposit Account No. _____ (Account Holder Name) for payment of fees.
<input checked="" type="checkbox"/>	Charge any additional fees or credit any overpayment to Deposit Account No. 50-0563 (IBM Corporation).

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Attorney Name	Joyce Tom, Reg. No. 48,681
Signature	
Date	October 16, 2003

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Petitions, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date: October 16, 2003	
Type or printed name	Grace Alicea
Signature	